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Convention on the Elimination of All Forms of Discrimination against Women

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Committee on the Elimination of Discrimination against Women
Twenty-third session
12-30 June 2000
Item 5 of the provisional agenda*
Implementation of article 21 of the Convention on the Elimination of All Forms of Discrimination against Women

Report provided by specialized agencies of the United Nations on the Implementation of the Convention in areas falling within the scope of their activities

Note by the Secretary-General

Addendum

World Health Organization

1. On behalf of the Committee, on 18 November 1999, the Secretariat invited the World Health Organization (WHO) to submit to the Committee, by 20 December 1999, a report on information provided by States to WHO on the implementation of article 14 and related articles of the Convention on the Elimination of All Forms of Discrimination against Women, which would supplement the information contained in the reports of the States parties to the Convention that will be considered at the twenty-third session. The annex to the present note contains a country brief prepared by WHO.

2. Other information sought by the Committee referred to activities, programmes and policy decisions undertaken by WHO to promote the implementation of article 14 and related articles of the Convention.

3. The report annexed hereto has been submitted in compliance with the Committee's request.

* CEDAW/C/2000/II/1.

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Annex

Report of the World Health Organization to the Committee on the Elimination of Discrimination against Women at its twenty-third session (June 2000)

Introduction

1. Under article 12 of the Convention on the Elimination of All Forms of Discrimination against Women States parties are required to "take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning". The article further draws particular attention to "appropriate services in connection with pregnancy, confinement and the postnatal period". The Beijing Platform for Action (1995) builds on this article and strengthens it by specifying five strategic objectives, as follows:

- To increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services;
- To strengthen preventive programmes that promote women's health;
- To undertake gender-sensitive initiatives that address sexually transmitted diseases, HIV/AIDS, and sexual and reproductive health issues;
- To promote research and disseminate information on women's health;
- To increase resources and monitor follow-up for women's health.[1]

2. This report presents currently available data on selected health indicators for countries submitting third or fourth reports (Iraq, Austria, Cuba and Romania) under four main headings: sexual and reproductive health; HIV/AIDS; health promotion and disease prevention; and violence against women.

Health status

3. Tables 1 to 6 present a summary of indicators in the areas of reproductive health, HIV/AIDS, tobacco use and violence against women.

4. **Iraq** has relatively poor indicators in reproductive health: a high maternal mortality ratio at 310 per 100,000 live births,[2] with only 54 per cent of births being attended by a skilled person; a low rate of contraceptive use, estimated to be 14 per cent of married women; and a correspondingly high total fertility rate of 5.3. There is no information on HIV/AIDS prevalence, tobacco use among women or violence against women.

5. **Austria**, which reports a maternal mortality ratio of 10 per 100,000 live births and skilled attendants present at all deliveries, shows the much improved reproductive health status in the industrialized world. Seventy-one per cent of married women are reported to use contraception and the total fertility rate is only 1.4. With regard to HIV/AIDS, it is reported that, by the end of 1997, 7,500 people were living with HIV/AIDS, of whom 1,400 were female. Homosexual transmission was the predominant route among men (49 per cent of all AIDS cases to 1997),

while women mostly were infected through intravenous drug use (42 per cent of all AIDS cases to 1997).[3] Tobacco use among women, estimated at 24.6 per cent in a 1995 survey, represents a continuing health hazard.[4] Violence is also a serious problem, with 19 per cent of women affected, as shown by a 1992 survey. Among divorce cases the percentage was 59.[5]

6. **Cuba**, in spite of a lower level of prosperity, shows relatively good reproductive health indicators; maternal mortality ratio is 95, with 99 per cent of births supervised by a skilled attendant. Contraceptive use, estimated at 70 per cent of married women, is at the same level as that in Austria, and the total fertility rate (1.6) reflects this concern for family planning.[6] The prevalence of HIV/AIDS is very low (0.02 per cent of adults) and 90 per cent of infections are transmitted through heterosexual contact.

7. In **Romania**, 99 per cent of deliveries are supervised by a skilled attendant, but the maternal mortality ratio remains relatively high at 130. Contraceptive use was estimated to be 57 per cent of married women in 1993, but more recent data are not available. The total fertility rate of 1.2 is in keeping with the trends in the region. The prevalence of HIV/AIDS infection is low. By the end of 1997, it was reported that the main mode of transmission was through blood products (19 per cent), followed by heterosexual transmission. There are no data on violence against women.

References

[1] *Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995* (United Nations publication, Sales No. 96.IV.13), chap. I, resolution 1, annex II, chap. IV, sect. C.

[2] WHO/UNICEF revised 1990 estimates of maternal mortality, Geneva (1996).

[3] WHO/UNAIDS epidemiological fact sheets on HIV/AIDS and sexually transmitted diseases, Geneva (1999).

[4] WHO, Tobacco Free Initiative (1999).

[5] WHO, Database on violence against women (1999).

[6] United Nations Population Division, New York (1999).

Table 1
Maternal mortality and attendance at birth

	Maternal mortality ratio (1990 estimates)	*Skilled attendant at delivery (%) (latest)*
Iraq	310	54
Austria	10	100
Cuba	95	99
Romania	130	99

Table 2
Legal status of abortion

	Abortion permitted						
	Save life	*Physical health*	*Mental health*	*Rape, incest*	*Fetal problems*	*Economic/ social*	*On request*
Iraq	X						
Austria	X	X	X	X	X	X	X
Cuba	X	X	X	X	X	X	X
Romania	X	X	X	X	X	X	X

Table 3
Contraceptive prevalence and total fertility rate

	Contraceptive use, % of married women		*Total fertility rate 1995-2000*
Iraq	14	1990	5.3
Austria	71	1981-1982	1.4
Cuba	70	1987	1.6
Romania	57	1993	1.2

Table 4
HIV/AIDS

	% adults	*Median % pregnant, urban*	*Median % pregnant, non-urban*	*Main modes of transmission*
Iraq	..	..	..	..
Austria	0.18	..	..	Intravenous drug users (42%) and heterosexual (39%)
Cuba	0.02	0	..	Heterosexual (90%)
Romania	0.01	..	..	By blood products (19%)

Table 5
Tobacco use among women

	Current regular smokers, age 15-25	
	Percentage	*Year of survey*
Iraq	No data	..
Austria	24.6	1995
Cuba	34.2	1995
Romania	15	1996/97

Table 6
Violence against women

	Field data	*Sample size*	*Sample group*	*Measure*	*Location*	*Time frame*	*Relationship*	*All types*	*Physical violence, %*	*Rape*	*Notes*
Austria											
Vienna	1992	1 500	Divorce cases	Report citation	..	In current marriage	Husband	59.0			Violence cited as factor in divorce case
Vienna	1992	200	All women	Interpersonal conflicts	Adult educ	Past 12 months	Male, non-spouse	19.0			